लेकिन देश के बड़े-बड़े नेता हैं जिनको हमने खोया है बम विस्फोट के कारण। हमारे प्रधान मंत्री जिनको हम खो पाए। After all, those who indulge in terrorism eye this as the most, convenient way of striking terror because they do not have to take any risk themselves.

SHRI BRATIN SENGUPTA: Does that mean that your Government is helpless?

SHRI L.K. ADVANI: In these matters. I would plead with you, let us not try to blame any one. If there is any one to blame, it is these terrorists who are against the humanity and who have no commitment of any kind, either to religion or to any one.

THE DEPUTY CHAIRMAN: Terrorists only believes in one religion and that is terrorism. Thank you, Mr. Home Minister, for your reply. Now, we have a Bill and there are'only two speakers, Mr. Bratin Sengupta and Dr. Raja Ramanna.

THE ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AMENDMENT) BILL, 2000

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): Madam, I move:

> "That the Bill further to amend tha All India institute of Medical Sciences Act, 1956, be taken into consideration."

Madam, as you. have rightly pointed out. this is a very small amendment to the Alt India Institute of Medical Sciences Act. Madam, the All India Institute of Medical Sciences was established by an Act of Parliament in 1956. Three Members of Parliament, two from Lok Sabha and one from Rajya Sabha, are elected by the Members on the Governing Body of the All institute of Medical Sciences. This amendment proposes that the moment a Member becomes a Minister or a Minister of State or a Deputy Minister or Deputy Chairman or Deputy Speaker, he should cease to be a member of the Governing Body. This is only a small amendment. I request that the Bill be taken into consideration.

The question was proposed

SHRI BRATIN SENGUPTA (West Bengal): Madam, I have no objection to the Bill itself. But since this is a premier institute of our country which used to carry and is till carrying a lot of weight and prestige,

it is supposed to serve accrued and chronic patients from the remotest corners of our country when no other avenues of treatment are left in their own State hospitals or general hospitals. Since this institute is run by an Act of *Parliament,* I feel the Government has got a big responsibility to perform over here. Everybody, perhaps, will agree that the situation in the All India Institute of Medical Sciences is no longer what it was earlier and what it is supposed to be. Nobody wants that it should be reduced to a Government dispensary or a CGHS Dispensary. Even there have been complaints, which one must have seen, that patients like *in* other hospitals such as Safdarjung etc., are lying on the floor of the AIIMS without being treated even for days and months together. There is nobody to attend to them. It is surprising for an institute like this. Definitely the AIIMS requires much more infrastructure because of the fact that this kind of an Institute is not there anywhere else in Delhi. This kind of an institute is not there in any other State all over the country. Therefore, there is a rush and there is tremendous pressure on it. Definitely, in order to overcome this rush here, some alternative arrangements should be made. But there are some problems which are not related to rush and patients from different States. For example, as was pointed out by me here yesterday, the machines are outdated. The Neuro Centre and the Trauma Centre which are the specialities of the AIIMS and which are not available in many general hospitals all over the country for which this is the only avenue for both patients and doctors, have not yet been properly built. The Trauma Centre is not there. The Neurosurgical Centre is lacking the infrastructure that it is supposed to have. Similarly, the administration in different centres is also not up to the mark and it is not as it should be in a referral hospital. Therefore, the Government should have taken an initiative so that the AIIMS could retain its stature and provide services which it was supposed to give as a referral hospital for the entire country and should serve the entire population of the country. The Government, unfortunately, could not act. The Government even could not settle the problems *of management* and other cases of corruption which have cropped up in the AIIMS. I am not naming anybody. But all of us know what happened in the case of a Medical Superintendent who was reinstated even after having been castigated by different organisations with regard to the cases of corruption, genuine case of corruption. But he was reinstated. People say that he was reinstated at the instance of the highest level in the Ministry. How could this happen in an institute like this? How can an institute like the AIIMS *retain its* prestige and dignity and provide services which it is

supposed to provide if this kind of cases, if this kind of people are there even after having been castigated by various Government agencies? They have been reinstated at the behest of the officials of the Ministry. Would the Minister kindly reply as to how could it happen Would the Minister kindly reply as to how this could happen? Would the Minister kindly reply how, when a professor of Nuero-surgery was going to be appointed by a selection Board, through a transparent system, through a transparent procedure, another person was appointed? I can even name him, but I just do not want to name him because he cannot defend himself here. But instead of the person who was selected by the Selection Board as a Professor of Nuero-surgery another doctor was selected -- I am not naming him also -- is being appointed. The Minister would be knowing about his appointment. We heard that this is also being done at the behest of the Prime Minister's Office. The Prime Minister's Office is a big entity. There are many people in it. Would the Minister kindly clarify who that particular person in the Prime Minister's Office is, as alleged, who is recommending the appointment of some other doctor who was not selected.

SHRI M. VENKAIAH NAIDU (Karnataka): When you bring in the institution of the Prime Minister's Office, you have to be careful. If you have the evidence you make a charge; we have no objection. But please refrain from bringing in the name of the Prime Minister's Office. If you have the evidence and you want to say it in the House with all responsibility, we are not going to say anything. I am making a request to you.

THE DEPUTY CHAIRMAN: Please substantiate.

SHRI M. VENKAIAH NAIDU: If you have the information, I am not going to come in the way. Otherwise, do not use the name of the Prime Minister's Office in a casual manner. It will be setting a wrong precedent.

SHRI BRATIN SENGUPTA: This is regarding the Neurological Department. It is alleged. If it is a fact, would the Minister at least clarify? I am not naming the doctor. The Selection Board had selected somebody, but he Is not being appointed, Appointment Is given to some other doctor. Is It a fact or not? If It Is a fact, under whose instructions did this take place? Now, there are many allegations; I am not going into It. If it hurts anybody, I am not going into it. This should not happen in an Institute like the AllMS. I have already pointed out about the trauma centres. The only thing I want to know from the hon. Minister is, will you kindly see that these things do not happen in the AllMS ? The Bill is innocuous. There is

4.00 P.M.

nothing wrong in the Bi as such. I am not opposing the Bill. But the dignity of AllMS is no longer what it was. The prestige of AllMS Is no longer what it was. It is simply not because of the fact that there is tremendous pressure from different places, but because of different reasons, because of problems of management and many other factors. Will the Minister kindly look into it? Thank you.

THE DEPUTY CHAIRMAN: Mr. Bhandari wanted to say something. He is not here. Dr. Raja Ramanna.

DR. RAJA RAMANNA (Nominated): Madam Deputy Chairman. I speak this afternoon with a sense of sadness because the AllMS was created with as an ambitions project to be one of the great hospitals of this country and in this part of the world. But as my hon. friend has already said, there have been problems, and so one asks oneself, why a Government institution, which is such an important one with so many good doctors, has not quite risen to the occasion. I have enough reason to believe that the institution is overloaded with patients. Everybody knows that. It is almost like e railway station. It was created for a very specific purpose of doing research on disease this country suffers from. All kinds of new diseases are coming into existence because of over-crowded slums; fa example, in the dear old city of Bombay, which makes me sad. We see-this happening. I have had a chance to visit the AllMS and look at some of the problems that had overtaken it. Now, it was created with an aim to get the best analysis done. I do know -1 do not want to mention his name - one of the most important persons in this country used to get his dialysis done there. He was always ill. He was always not available. He was a very important political man and it was found out that he looked at the internet and found that there were faults in the water which can give rise to these kinds of things and which had not been diagnosed or measured in any place In this country.

Now, If we have an institution like the AllMS, you can judge what should be the level of medical assistance. There are many wonderful doctors in this country. But we have lost contact in our hospitals with modem science. Everybody responds, it is a hospital. Give me medicine. Give me injection. But who thinks of, new methods by which new diseases are diagnosed. In connection with this Bill, just by saying that a Minister can be the Chairman or can not be the Chairman, does not lead to the

quality of medical science people. There should be enough Physics, Biology and Chemistry. Now, these things form medical science which help *in the* diagnosis of diseases and, to deal with a large number of people, it has to be done, almost, *on a* very top quality basts, with the highest level of cleanliness and purity. I cannot say many hospital in this country, except a few small hospitals, maintains that required purity. Madam, recently. I saw a hospital in Paris in which everything, even transfer of medicines from one place to another, is done by robots; not robots looking like the usual Frankenstein's robot but the ones Designer for a special purpose. They are all organised to give the medicine at the appropriate place and come back. There is no business of *coolies* or human beings being used to clear up the filth. All this, I believe, is not what we have attempted to in this gifted country of ours. I should not criticise the bill too much. But, according to the Bill, it mentions just three people who may or may not be fully knowledgeable about alt these matters, if it is so, the Bill by itself is not of any value. I cannot ask the hon. Minister to come forward with a better *Bill in* the light of what I have said. I am too small a person. As I do know that the country *sutfers* from a lack of high quality medical inputs. I will leave it at that place. But if you put the Bill to *vote,* i will vote against it. Thank you.

THE DEPUTY CHAIRMAN: Dr. Ramanna, you are very much a doctor, though not a medical doctor. Actually, a person who holds a Ph.D
degree should be called as a doctor. There is no disrespect to you.

DR. RAJA RAMANNA: Thank you. Madam.

THE DEPUTY CHAIRMAN: Doctors are the most respectable people. Because they solve the problems of the ailing people, they are given this honour.

श्री रामदेव भंडारी : (**बिहार**) महोदया, मैं आपके माध्यम से माननीय मंत्री जी से निवेदन करना चाहूंगा। माननीय मंत्री जी बिहार से आते हैं और बिहार में ही नहीं, पूरे देश के बड़े डॉक्टरों में इनका बहुत नाम है। महोदया, हम लोग अपने फ्लैट का एक कमरा, 'एम्स' में इलाज कराने के लिए जो मरीज़ आते हैं, उनके लिए अलग रखते हैं। महोदया, बिहार से ही नहीं, उत्तरी हिंदुस्तान से, नेपाल से भी इलाज के लिए यहां आते हैं। जिनको स्थानीय डॉक्टर रिफ्यूज़ कर देते हैं, वे इस उम्मीद और आस्था के साथ यहां आते हैं कि यहां आने के बाद वे पूरी तरह से स्वस्थ होकर जाएंगे। महोदया, जो लोग इलाज के लिए यहां आते हैं, उनको दो तरह की कठिनाइयां आती हैं। एक तो रहने की जगह की काफी कमी है और वहां हस्पताल में काफी इंतजार करना पड़ता है। अधिकांश गरीब लोग, माध्यम वर्ग के लोग या निम्न मध्यम वर्ग के लोग ईलाज के लिए यहां आते हैं। बड़े लोगों के लिए तो अपोलो हॉस्पिटल है, एस्कॉर्ट्स् है मगर

जो गरीब लोग गंभीर बीमारी के इलाज के लिए यहां आते हैं, किडनी का इलाज कराने के लिए आते हैं, हार्ट का इलाज कराने के लिए आते हैं, उनको समय बहुत लग जाता है। सुदूर गांवों के लोग भी आते हैं, शहर के लोग भी आते हैं, दूर-दराज के लोग आते हैं तो उनको काफी दिनों तक यहां रहने में कठिनाई होती है इसलिए मैं निवेदन करना चाहूंगा कि सीटों की संख्या बढ़ाई जाए।

दूसरी बात जो मैं महसूस करता हूं कि रहने में उनको काफी दिक्कत आती है। जो गरीब लोग यहां आते हैं , हॉस्पिटल के आस-पास उनके लिए रहने की व्यवस्था नहीं है। मैं मंत्री जी से निवेदन करना चाहूंगा कि 1000 कमरों की व्यवस्था कराई जाए और एक पेशेंट के साथ जो लोग आता है उसको कमरा नॉमिनल भाड़े पर दिया जाए। अगर आप उधर से जो जाएं मैडम, किसी दिन आप देखेंगी कि बाहर ही लोग धूप में पेशेंट के साथ पड़े रहते हैं। मैं निवेदन करना चाहूंगा कि वहां पर सीटों की व्यवस्था अधिक से अधिक की जाए ताकि जल्दी से जल्दी मरीजों का इलाज हो सके और वे स्वस्थ होकर वापस जा सकें। रहने के लिए नार्मल रेट पर एक हजार कमरे बना दिए जाएं ताकि उनको धूप और बारिश में जो सड़क पर रहना पड़ता है उस से उनको मुक्ति मिल जाए।

उपसभापति : मंत्री जी, वैसे तीनों सजेशन्स अच्छे आये हैं। वैसे आपके बिल में कुछ थोड़ा संशोधन करने का है। मैं तो यह चाहूंगी कि आप भी चेयरमैन साहब के सामने यह बात रखें कि हमारे मैडिकल सिस्टम पर एक चर्चा होनी चाहिए क्योंकि हमने बहुत कम इस पर चर्चा की है और आज इसकी बहुत जरूरत है कि हम ऐसे विषय पर चर्चा करें। आज नई-नई बीमारियां आ रही हैं। जैसा डॉ. राजा रामण्णा ने कहा एक संस्था बनी थी 'आल इंडिया इंस्टीट्यूट आफ मैडिकल साइंस' मुझे याद है कि प.जवाहर लाल नेहरू ने कहा था He used to consider it a very important institute. He was so proud of it. It is a referral hospital. Now it is just like a CGHS dispensary. मुझे इस बात का गर्व है कि वहां के डाक्टर फिर भी हैंडल कर पा रहे हैं, आपरेशन के इतने पेशेंट के प्रैशर्स को। तो पूरे सिस्टम को हम कैसे ठीक कर सकें, हैल्थ की समस्या का समाधान हो सके। क्योंकि आप डॉक्टर हैं इसलिए मैंने खासतौर से चेयर से यह बात कही है। आप इस का ध्यान रखिए और जरूर चेयरमैन साहब से इसकी बात कहिए, मैं भी कहूंगी कि हम इस पर एक अच्छी सी चर्चा करें ताकि लोगों के हैल्थ के बारे में बात हो सके। अब आप अपना बिल पास करा लीजिए। जो भी आप से कहा गया है उस पर जवाब दे दीजिए।

डॉ सी॰पी॰ ठाकुर : मैडम, यहां पर हमारे साथी भंडारी जी, सेनगुप्त जी और रामण्णा जी ने जितनी बातें कही हैं उन सभी की ओर हम ध्यान दे रहे हैं। रामण्णा जी तो खुद बहुत बड़े साइंटिस्ट रहे हैं। साइंस के विषय में जैसा इन्होंने कहा कि ये लोग साईंस ही नहीं रखते हैं।

उपसभापति : मैं भी साईंस की हूं। Biological sciences are more closer.

डॉ.सी.पी.ठाकुर : जब मैं वर्ल्ड हैल्थ आर्गेनाइजेशन में काला ज्वर पर 1982 में भाग लेने के लिए गया तो पूरी तैयारी के साथ गया था कि काला ज्वर के लक्ष्ण ये हैं और वो हैं, सब पर पूरी चर्चा होगी, लेकिन वहां पर उस बारे में कोई बोला ही नहीं सब आदमी इम्यूनोलोजी पर बोल रहे थे। जब मैं दुसरे साल इम्यूनोलोजी पर तैयारी करके गया तो देखा की वहां इम्यूनोलोजी पर कोई नहीं बोला, सब जैनेटीक पर बोल रहे हैं। साईंस की गति इतनी तेज है इस तरह

से रिसर्च हो रहे हैं, मैडिकल साईंस तो और भी तेज है तो हम लोग इस इंस्टीट्यूट को जैसी कल्पना में सैंटर आफ एक्सी लेंस के रूप में रखा गया था, हम लोग चाह रहे हैं कि सैंटर आफ एक्सीलेंस रहे। इसके ट्रोमा सैंटर की बात हमारे सेनगुप्त साहब ने कही है, हम ट्रोमा सैंटर तुरन्त राम मनोहर लोहिया में बीस करोड़ का काम हम खोलने जा रहे हैं और एम्स में भी खोलने की बात चला रहे हैं। एक ट्रांस्पलांटेशन के लिए एम्स मे मैंने केन्द्र तुरन्त खोला है और भंडारी जी ने धर्मशाला की बात कही है कि रहने की दिक्कत है तो हम वहां धर्मशाला भी बनाने जा रहे हैं और एक स्क्रिनिंग आउट डोर की भी हम लोग तुरन्त व्यवस्था करने जा रहे हैं, एक इमरजेंसी ब्लॉक वहां पर बनाने जा रहे हैं। हर एक विभाग में थोड़ी-थोड़ी सीटें हम बढ़ाने जा रहे हैं। ताकि सभी लोगों का वहां पर तूरन्त इलाज हो सके। हम एक मास्टर प्लान भी बना रहे हैं कि कैसे यह इन्क्रीज हो। रामण्णा साहब की बात हम जरूर ध्यान में रखेंगे। जो सैंटर आफ एकसीलेंस है उसको हमेशा एकदम अपटूडेट रखना पड़ेगा। केवल काम ही देखना जरूरी नहीं है क्वालिटी आफ वर्क, जैसे एक कहावत है 'औरत केवल साड़ी पहनती है उससे मतलब नहीं कि उसको किस तरह से पहनती है, हम लोगों की तरफ कहा जाता है ...(**व्यवधान**)...

उपसभापति : आप पुरूषों के कपड़ो पर ऐतराज क्यों नहीं कर रहे हैं। ...(**व्यवधान**)... वे कैसे कपड़े, धोती और सूट पहनते हैं। महिलाओं पर ही आपकी निगाह क्यों रहती है।

श्री बालकवि बैरागी (**मध्य प्रधेश**) : माननीय उपसभापति जी, इस टिप्पणी पर मुझे एक बात कहनी है – अगर संसार में नारी नहीं होती तो पुरूष कपड़े पहनता ही नहीं।

उपसभापति : अगर संसार में, भारत में नारी नहीं होती तो साड़ी भी नहीं होती।

डॉ. सी.पी. ठाकुर : इन्हीं शब्दों के साथ मैं निवेदन करूंगा कि इस बिल को पास कर दिया जाए। आपका बिल पास कर देते हैं लेकिन आपने एक बात रामण्णा आश्वासन नहीं दिया कि आप हाउस में डिस्कशन करने आएंगे।

डॉ. सी.पी. ठाकुर : आएंगे, मैडम।

THE MINISTER OF STATE IN THE MINISTRY OF PARLIAMENTARY AFFAIRS (SHRI O. RAJAGOPAL): Madam, a statement has to be made by the hon. Minister.

THE DEPUTY CHAIRMAN: Which statement is it?

SHR! o. RAJAGOPAL: It is regarding reported Leptospirosis outbreak in Maharashtra and Gujarat.

THE DEPUTY CHAIRMAN: This is a very limited subject. New cures are being found. As you said, first, the discussion took place on immunology; and .now, discussion on genetic engineering is taking place, They are forming new people. I mean, cloning is going on. Same thing is happening in the case of diseases also. Every day new diseases are coming. The most important thing which we have to deaf with in our country is HIV/AIDS. We do not have proper facilities to treat the people

who are affected with HIV/AIDS, not for those who *are* suffering from it, but for those who have got it. We have to think about them also क्योंकि उनकी दशा बहुत खराब है इसलिए हमें और सरकार को इस ओर ध्यान देना चाहिए।

Now, the question is:

That the Bill further to amend the All India Institute of Medical Sciences Act, 1956, be taken into consideration.

The motion was adopted.

THE DEPUTY CHAIRMAN: We shall now take up clause-by-clause consideration of the Bill. Clause 2 . There is one amendment. Mr. Bratin Sengupta, are you moving it?

SHRI BRATIN SENGUPTA: No, Madam. I am not moving it.

Clause 2 was added to the Bill.

Clause 1, the Enacting Formula and the Title were added to the

Bill DR. C.P. THAKUR: Madam. I move:

That the Bill be passed, *The*

question was put and the motion was adopted.

THE DEPUTY CHAIRMAN: Now we *wi}} take* up the Short Duration Discussion.

DR. C.P. THAKUR: Madam, there is a small statement which has to be made.

उपसभापति : जी अभी । हमारे यहां समस्या टेक्नीकली स्मॉल होती है पर प्रैक्टिली राज्य सभा में वह समस्या बड़ी हो जाती है क्योंकि अगर आपने suo moto स्टेटमेंट यहां किया than we will not be able to disacuss anything else

DR. C.P. THAKUR: I have already given the statement.

SHRI O, RAJAGOPAL: It is a technical subject.

THE DEPUTY CHAIRMAN: A technical subject also has some nontechnical,.

DR.C.P. THAKUR: I *have akeady* given the statement.

THE DEPUTY CHAIRMAN: Since you are present here, I will take the sense of the House. If the House so agrees, you can read it.

Whenever we find time, we would ask you to come back. Is it regarding the deaths in Mumbai?

DR. C.P. THAKUR: Yes, Madam.

उपसभापति : आप पढ़ दीजिए।

DR. C.P. THAKUR: Madam,

SHRI NARENDRA MOHAN (Uttar Pradesh): Madam, can we get a copy of the statement?

उपसभापति : अभी आ रहा है। We are not discussing it now. कॉपी अगर है तो दे दिजिए।

DR. C.P. THAKUR: Madam,...

श्री के. रहमान खान (**कर्णाटक**) : शॉर्ट ड्यूरेशन है न?

उपसभापति : खाली स्टेटमेंट पढ़ रहे हैं। इसे डेफर करेंगे।

डॉ. सी.पी. ठाकूर : क्लेरिफिकेशन अभी करेंगे?

उपसभापति : नहीं बाद में डेफर करके देंगे। Now *you* read the statement. बाद में आपको अनुमति देंगे जब यह हो जाएगा।

STATEMENT BY MINISTER

Reported Leptospirosis outbreak in Maharashtra and Gujarat

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): Recently, practitioners from North-west of Mumbai and adjacent area from Thane District (Malad-Virar) as weff *as* from Central part of Thane district (Kalyan),. reported increase in fever with a typical feature like bleeding and hepato-renal failure with involvement of lungs and high mortality. The practitioners from Mumbai suspecte'd Leptospirosis. Immediately concerned officers from the State visited the places and carried out the basic investigation, including entomological studies and gave directions regarding control.

To meet the crisis a meeting of officers from Health Services, Medical Education and Research and Municipal Corporations was convened in the Directorate of Health Services, Mumbai on 29th July, 2000. The possibilities considered for increased fever cases were Leptospirosis,